

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	UF	69607	7/25/00
O.P.E. CLASSIFIER		59	7/31
FORMALITY REVIEW	NL	553	9-22-00
RESPONSE FORMALITY REVIEW	RJ	1078	04/20/01

# INDEX OF CLAIMS

✓ \_\_\_\_\_ Rejected      N \_\_\_\_\_ Non-elected  
" \_\_\_\_\_ Allowed      I \_\_\_\_\_ Interference  
- (Through numeral) \_\_\_\_\_ Canceled      A \_\_\_\_\_ Appeal  
+ \_\_\_\_\_ Restricted      O \_\_\_\_\_ Objected

Claim	Date
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If more than 150 claims or 10 actions  
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